

SOS RN General Overview of Counseling Approach

The 5 A's general approach

Ask: Ask to discuss, ask screening intent

1. No testing wanted – OK next year?
2. FOBT/FIT
3. FS
4. CS
5. FOBT/FIT and FS
6. Don't know want more information
7. Wants to discuss with physician
8. Refuses to engage

Assess:

Clinical Issues

- Is the patient at average risk for CRC? (should be based on survey eligibility screening, but some will slip through).
- Is patient too sick to benefit from CRCS? (should not be based on survey eligibility screening, but some will slip through)
- Is the patient at higher risk for complications from sigmoidoscopy or colonoscopy? Prior screening, risk factors for screening tests (e.g. cardiac disease, diabetes, warfarin).

Knowledge, attitudes, and beliefs

Screening intention – Do they have a screening intention in mind? Do they need help defining intent?

Awareness, knowledge, attitudes, and beliefs about:

- personal risk and need for screening
- pros and cons of tests
- ability to complete testing

Advise:

1st - Based on patient's history, risk factors for cancer, and risk of adverse event from screening –

2nd -Based on patient's awareness, knowledge, attitudes, and beliefs for screening in general-

3rd -Specific to their preference for the type of test-

Agree:

Agree on screening intent and create an action plan

Arrange:

- Action plan completion
- Follow-up with primary care provider as needed

Assist with scheduling, arranging prep, pre-procedure preparation